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DECLARATION FOR UTILITY OR DESIGN			Attorney Docket Number	er	102	
			First Named Inventor	S	winton B.	Burkhalter
PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN				
		Application Number				
Declaration Submitted with Initial Filing		C Sections:	Filing Date	-		
	OR	OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit			
			Examiner Name			

As a below named inventor, I hereby declare that:						
My residence, mailing address, and citizenship are as stated below next to my name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
MULTI-RISK INSURANCE SYSTEM AND METHOD						
the specification of which	(1	itle of the Invention)				
is attached hereto						
OR		as United :	States Application I	Number or PCT International		
☐ was filed on (MM/DD/YYYY)				(if applicable).		
Application Number	and was a	mended on (MM/DD/Y)	vv) [
I hereby state that I have reviewed amended by any amendment spe	d and understand the co	ontents of the above ide	entified specification	n, including the claims, as		
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
			0000	0000		
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
Application Number(s)	Filing Dat	Filing Date (MM/DD/YYYY)		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.		

[Page 1 of 2]
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NAME OF SO	LE OR FIRST	INVENTOR	:		A petiti	on has been file	ed for this unsigned inventor
Given Name (first and middle [if any]) Swinton B. Family Name or Surname Burkhalter							
Inventor's Signature Date 1-19-01					Date /-/9-0/		
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City At	lanta	State	Georgia		ZIP	30350	Country USA
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Frank M. Family Name or Surname Sexton							
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Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							